

**HAWAII STATE ETHICS COMMISSION**

1001 Bishop Street, ASB Tower Suite 970  
 Honolulu, Hawaii 96813  
 P.O. Box 616, Honolulu, Hawaii 96809  
 Telephone: 587-0460 Fax: 587-0470  
 email: ethics@hawaiiethics.org

**GIFTS DISCLOSURE STATEMENT**

*(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due on June 30)*

<b>NAME:</b> Chiyome Leinaala Fukino, M.D.	<b>STATE POSITION:</b> Director of Health
<b>STATE AGENCY:</b> Department of Health	<b>STATE TEL. NO.:</b> 586-4410
<b>STATE MAILING ADDRESS:</b> 1250 Punchbowl Street, 3rd floor Honolulu, HI 96813	

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE
	None.								

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE
			'06 JUN 21 A9:40						
			STATE OF HAWAII STATE ETHICS COMMISSION						

\_\_\_\_ Check here if you have attached additional sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

  
SIGNATURE

June 20, 2006  
DATE